## IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD 510 EAST 12<sup>TH</sup>, SUITE 1A

DES MOINES, IA 50319 Fax: (515)281-3701 www.iowa.gov/ethics



lowa Code section 8.7 requires all gifts, bequests, and grants given to any department of the state of lowa or received by the Governor on behalf of the state be reported to the lowa Ethics and Campaign Disclosure Board and the Government Oversight Committee. The Board will provide a copy of this report to the Government Oversight Committee. This form is required to be filed within 20 days of receipt of the gift, bequest, or grant.

## **FORM-GBG**

Gift, Bequest, or Grant information received by a department or accepted by the Governor on behalf of the state

| Indexed   | For office use only |  |
|-----------|---------------------|--|
| Audited _ |                     |  |
| Checked   |                     |  |
| Compute   | r                   |  |
|           |                     |  |

| DEPARTMENT | OR OFFICE RECEIVING | THE GIFT. | BEQUEST. | OR GRANT |
|------------|---------------------|-----------|----------|----------|
|------------|---------------------|-----------|----------|----------|

| Fort Dodge Correctional Facility   |  |  |  |  |
|--|--|--|--|--|
| Name of Department or Office   |  |  |  |  |
| Mailing Address  | Fort Dodge, Iowa 50501   |  |  |  |
| 15-574-4700 City, State, Zip Code  |  |  |  |  |
| Area Code & Telephone No.  |  |  |  |  |
| ONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE                               | E:   |  |  |  |
| Cornell R. Smith   |  |  |  |  |
| Name<br>Same   |  |  |  |  |
| Mailing Address (if different from above)                                      | 011 01 11 11 11 11 11 11 11 11 11 11 11  |  |  |  |
| Cornell.Smith@iowa.gov   | City, State, Zip (if different from above)   |  |  |  |
| Email Address  | Area Code & Telephone Number (if different from above)   |  |  |  |
| ONOR OF CIET REQUEST OR ORANG  | i i i i i i i i i i i i i i i i i i i  |  |  |  |
| ONOR OF GIFT, BEQUEST, OR GRANT:   |  |  |  |  |
| Church of the Damascus Road  | ·  |  |  |  |
| lame   |  |  |  |  |
| P. O. Box 834 Fort Dodge, Iowa 50501   |  |  |  |  |
| Mailing Address City, State, Zip Code  | October 17, 2007 \$ 0.00   |  |  |  |
| 515-955-3579   | D. J. CON D.   |  |  |  |
| Area Code & Telephone Number   |  |  |  |  |
|  | *value is defined as "fair market value" of item as determined by receiving department or office. If no value mark "0.00". |  |  |  |
| mail Address (optional)  | The value mark 0.00°.  |  |  |  |
| Provide a description of   |  |  |  |  |
| Provide a description of the gift, bequest, or grant and purpose thereof:      |  |  |  |  |
| Quarterly issues of Our Daily Bread devotional booklet                         | ts to be used by offenders in religious activities   |  |  |  |
|  | of chieffels in lengious activities.   |  |  |  |
| Criteria to use this form:   |  |  |  |  |
|  |  |  |  |  |
| Receipt of any gift, bequest, or grant that is received by any department of t | the state or received by the Governor on behalf of the state.  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| ement of Affirmation:  |  |  |  |  |
| $\mathcal{J}$ $\mathcal{O}$ ,  |  |  |  |  |

St

\_affirm that the gift, bequest, or grant reported above is accurate. I further affirm that the information concerning the

Signature